

**Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:** TAS Consulting Group, Inc.

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** TASCON; The TASCON Business Analyst;  
The Business Analyst

**Address of Service Provider:** 6326 Stonefield Rd., Middleton, WI 53562

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Theodore A. See

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  
6326 Stonefield Rd., Middleton, WI 53562

**Telephone Number of Designated Agent:** 608-827-6349

**Facsimile Number of Designated Agent:** 608-827-6349

**Email Address of Designated Agent:** tsee@thetascongroup.com

**Signature of \_\_\_\_\_** **Representation of the Designating Service Provider:**  
\_\_\_\_\_  
Date: 8/7/05

**Typed or Printed Name and Title:** Theodore A. See, President

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee  
Made Payable to the Register of Copyrights.**

SCANNED

8/10/05

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RECEIVED

AUG 10 2005

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